ANNUAL REPORT

on the

HEALTH

of the

Rural District of Dursley for the Year 1950

by the

MEDICAL OFFICER OF HEALTH



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Engineer and Surveyor and Chief Sanitary Inspector:

H. J. Dimery, A.I.A.S., M.R.S.I.

Deputy Sanitary Inspector: T. B. Chaffe, M.S.I.A.

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DURSLEY RURAL DISTRICT COUNCIL

Council Offices,

Kingshill,

Dursley,

Gloucestershire.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR ENDING 31st DECEMBER, 1950.

Mr. Chairman, Sir, Ladies and Gentlemen,

I have pleasure in submitting my fourth Annual Report for this District.

The Report is based in accordance with the requirements of the Ministry of Health Circular 112/50, dated 6th December, 1950, and statistics are based mainly on the returns made to me by the Registrar General.

One often feels in Public Health work that little has been achieved during a specific year, but I often think this is due, in part, to the fact that Preventive Medicine, if it is being done well, gets no publicity. One only hears about a Public Health Department in the press, when an epidemic occurs in the area, and then, in many instances, the publicity is only available because the Health Department may have failed in its duties.

The work in the department has increased considerably during the past few years. Much more interest is being taken in milk and ice-cream sampling, factory inspection, inspection of food premises and shops generally. The public Water Supply is being kept under closer supervision and more sampling is being carried out.

I think one of the most important responsibilities of our department is with regard to housing conditions. There are approximately 3,117 non-Council dwellings in the district of Dursley, and many of these are found in a state of disrepair. Others are structurally unsound or affected with dampness, insufficient lighting, inadequate sanitary accommodation, and so on.

Following a report to the Health or Housing Committee, the necessary action is taken to deal with unsatisfactory conditions

in each case; this may lead to the repair and reconditioning, or demolition order on the property. Unfortunately the allocation of new houses is so small that many of the really bad properties have had to be dealt with leniently, i.e., make them wind-proof and watertight to last for a number of years until the housing position improves. In many cases the officers find it very difficult to ask landlords to carry out the necessary repairs under the Housing Act because the property could not be brought up to a proper standard at a reasonable cost. Therefore the items of disrepair are dealt with as nuisances under the Public Health Act. If the Rent Restriction Act was reviewed by Parliament with a view to giving landlords a reasonable rent, taking into account the large increase in the cost of repairs during recent years, then a definite improvement in this section of the Public Health work would take place.

The Parliamentary Secretary to the Ministry of Health recently reported that "the average age at death in Great Britain in the years 1900, 1910, 1920, 1930, and 1940 was 35, 40, 44, 54, and 58 years respectively." During 1949 and 1950 the average age at death was 61.3 and 64.88 years in the Dursley Rural District. This is no mere accident. The Environmental Health Services have done much to aid this achievement, and of this, it is felt, the Dursley Public Health Committee can justly be proud.

In conclusion, I wish to express my appreciation of the support and encouragement given me during the year by the Chairman and Members of the Public Health Committee. Also, again, I wish to thank the staff of the Public Health Department for their support and loyalty during the year.

I have the honour to be,

Your obedient servant,

W. J. Douglas Cooper,

Medical Officer of Health.

To the Chairman and Members of the Dursley Rural District Council.

PART I.

GENERAL REPORT OF THE MEDICAL OFFICER OF HEALTH.

1.—SOCIAL CONDITIONS.

No important change has taken place in the nature of the chief trades carried out in the District. There are:—

- (1) Agriculture and Allied Trades.
- (2) Braid and Loom Elastic and Smallwares.
- (3) Flour Mill.
- (4) Baking.
- (5) General Engineering.
- (6) Electrical Engineering.
- (7) Carpet Manufacturing.
- (8) Cloth Manufacturing.
- (9) Paper Pulping Mills.
- (10) Fibre Box Manufacturers.
- (11) Wood Turneries.

2.—STATISTICS, 1950.

(a) GENERAL STATISTICS.

Area of District	 26,905	aere
Population	 17,080	
Number of inhabited properties	 5,117	
Number of inhabitants per property	 3.338	
Rateable Value	 £69,898	
Sum represented by 1d. Rate	 £274	
Number of Council Houses	 1,084	
Number of Requisitioned Houses	 25	
Percentage of Council Houses	 21.18	
tad Duanantian		

Inhabited Properties.

Houses		 	 4,715 168
Farms Houses and Shops		 	 184
Public Houses		 • • •	 50
	Total	 	 5,117

Percentage of population served by Main water ... 98%

Percentage of population served by modern sewers 66% Varying Populations of Dursley Rural District.

Year			Po	pulation
1901	 	 		11,636
1911	 	 		12,233
1921	 	 		12,560
1931	 	 	• • •	13,217

`								
	Year.						Populatio	n
	1937 .						14,400	
		• •					14,600	
		• •					16,122	
		• •			• • •		16,220	
		• •			• • •		16,290	
	1948 . 1949 .						16,610	
	3050	• •					16,870 17,080	
F	rom these fig		 t-ean-l				,	of the
Distri	ct still continu	ues to	increa	ise.	ii tiitte	the p	Spanation	OI the
					marcu	maraa		
(b) E	XTRACTS F	ROM	VITA	AL SI	'ATIS'	TICS.		*
Live I	Births:			Tot	al	\mathbf{M} .	F.	
	Legitimate			25	6	128	128	
	Illegitimate				1	5	6	
	C.						·	
		Tot	al	26	7	133	134	
	Birth Rate p							
	Birth Rate,				es, pe	r = 1,00		
	Civilian	Popu	lation				15.8	
Still E	Births :			Tot	al	\mathbf{M} .	\mathbf{F} .	
	Legitimate				6	1	5	
	Illegitimate				Ì	ī	_	
	('			Marine				
		То	tal		7	2	5	
				_	_			
	Still Birth R						0.41	
	Still Birth R							
		per	-1,000	Civil	ian Po	pulati	on 0.37	
Death	<i>s</i> :							
	Number of D	eaths	registe	ered in	ı Durs	lev Ru	rol	
	District							
	80 of th	iese w	ere M	ales a	nd 115	Fema	les.	
	Death Rate i							
	1,000 Ci	vilian	. Popu	lation			11.4	
	Death Rate,	Eng	land a	ınd W	7ales	per 1,	000	
	Civilian	Popu	lation		• •		11.6	
	Death Rate							
							12.3	
	Death Rate							
	Death Rate in							
	The average	age	or Ma	ie Det	uns n	Durs	1ey 60.06	27.0.12
	auring t	пе уе	ar was f Form	ole D	···		${65.97}$	years
	The average	age o	rem	are De	atns . Ldootl	ac dans	03,07	years
	Making the						64.88	years
	the year	шЪ	arsicy		• •	• • •	01.00	years

Longevity of the District.

Ages at	Death		Males	Females	Total
0 - 1	year	* * *	5	3	8
1 - 20	years		3	5	8
20 - 40	years		8	4	12
40 - 50	years		2	3	5
50 - 60	years		£.[.	13	17
60 - 70	years		19	15	34
70 - 80	years		23	37	60
80 - 90	years		15	31	46
90 - 100	years		1	41.	5
		Totals	80	115	195

This table shows that the majority of deaths are taking place in the 70 - 90 age groups.

Number of Women dying in, or in consequence of, Childbirth.

From Sepsis	 	Nil
From other causes	 	Nil
Rate per 1,000 Total	 	Nil
(live and still births)		

This Rate has been nil for the past four years and speaks highly of the care given to the mother during childbirth by the local midwives, General Practitioners, Hospitals and Nursing Homes.

Deaths of Infants under 1 year:

			Mal	e Femal	e Total
Legitimat	e		5	3	8
Illegitima	te		. Nil	Nil	Nil
Infant Mortality	Rate:				
				year of ag	
Infant Mo	ortality	Rate f	or Engla	and & Wale	es 29.8
Legitimat births		-		gitimate liv	
Ulegitima births		•		gitimate liv	TAT • E

Causes of Deaths of Infants under 1 year.

Sex.	Age.	Cause of Death.
F.	5 mins.	Asphyxia Neonatorum.
F.	24 hrs.	Congenital Heart Disease.
M.	8 mths	Broncho-Pneumonia.
F.	15 days	Congenital Deformities.
M.	8 mths	Lung Abscess.
M.	1 week	Prematurity.
M.	4 weeks	Gastro-Enteritis.
M.	1 day	Congenital Deformities.

Cancer Deaths.

There were 36 deaths from Cancer during the year: 19 Males and 17 Females succumbed to this disease.

The average age of these cancer deaths was 67.0 years.

Below is given the various types of Cancer that occurred:—

Cancer of Breast				5 cases
Cancer of Skin				3 cases
Cancer of Gall Bladder				1 case
Lymphogranuloma Mal	igna			1 case
Cancer of Bone				2 cases
Cancer of Colon				3 cases
Cancer of Rectum				4 cases
Cancer of Stomach				7 cases
Cancer of Pancreas				2 cases
Cancer of Larynx				2 cases
Cancer of Liver				1 case
Cancer of Brochus				1 case
Cancer of Kidney				1 case
Cancer of Bladder				2 cases
Cancer of Oesophagus				1 case
		Total	>	36 cases

It is interesting to note that the most common causes of death from Cancer are that of the stomach and breast as primary sites of the disease. These are actually two of the types with the best prognosis when diagnosis is made early. It makes one think that more propaganda should be put over to the general populace in relation to these two types of cancer, so that they can be aware of the dangers in delay in going to see their General Practitioner.

Tuberculosis Deaths.

There were 4 deaths attributed to Tuberculosis—3 males and 1 female.

The average age of these deaths was 34.2 years.

One of the deaths was that of a male child of 6 years who died of tubercular Meningitis despite modern treatment.

Whooping Cough Deaths.

There was one death from Whooping Cough. This was a female child of 13 months.

Diabetic Deaths.

There were two deaths from this disease. One was a male and the other a female.

The average age was 66.0 years. This average may indicate that people can live to a fair age with insulin therapy when labelled diabetic.

Rheumatic Heart Disease Deaths.

There were three deaths from this disease during the year.

Anterior Poliomyelitis Deaths.

A female aged 9 years and one aged 4 years died from this infectious disease.

Coronary Thrombosis Deaths.

Seven males and 9 females died from this type of heart disease. Their average age was 69.1 years.

The most common causes of death in this District are therefore:—

Heart Disease			 68 cases
Intracranial Vascula	ar Lesio	ns	 36 cases
Cancer			 36 cases
Infant Deaths			 8 cases
Pneumonia			 7 cases
Tuberculosis		* 4 4	 4 cases
Anterior-Poliomyel	itis		 2 cases

Deaths in Hospitals.

Royal Hospital, Gloucester	13	cases
Hostels	5	cases
Stroud General Hospital	1	case
Lydney District Hospital	1	case
Northleach Hospital, Eastington	1	case
Snowdon Road Hospital, Bristol	1	case
Bristol Royal Infirmary	1	case
Bristol Children's Hospital	3	cases
Cheltenham General Hospital	1	case
Southmead Hospital, Bristol	5	cases
Berkeley General Hospital	2	cases
Coney Hill Hospital, Gloucester	2	cases
Thornbury Hospital	4	cases
Highnam Isolation Hospital, Glouceste	r = 1	case
Sunnyside Mental Hospital, Cheltenhan	u 1	case
Ham Green Isolation Hospital	2	cases
Corsham Hospital, Bristol	1	case
Dilke Hospital, Cinderford	1	case
Mitcheldean Hospital	1	case
Kingshill Nursing Home	1	case
Total	48	cases

Total Deaths — 195.

26% of the deaths of people belonging to this area take place in hospitals.

All of these hospital deaths (except one in a local Nursing Home) took place outside the Dursley Rural District. In fact from the list of hospitals given it can be seen that Dursley people are being sent to hospitals as far apart as Cheltenham in the North, Lydney in the West, and Bristol in the South. This involves a tremendous lot of travelling for relatives, patients and ambulances, and inconvenience to the public in general.

Southmead Hospital Group Management Committee have now scheduled this area for a General Hospital with Maternity Block in their future development plan. It is to be hoped that the Ministry and the South West Regional Hospital Board will see their way soon to expedite the building of this hospital for an area which is increasing its population every year since the late war.

TOTAL 195.

CAUSES OF DEATHS	Under 1 year	1	15	25-	45	65—	75-	Total
1. Typhoid and paratyphoid fevers 1 2. Cerebro-spinal fever 2 3. Scarlet Fever 3 4. Whooping Cough 4 5. Diphtheria 5 6. Tuberculosis of Respiratory System 6 7. Other Forms of Tuberculosis 7 8. Syphilitic Disease 8 9. Influenza 9 10. Measles 10 11. Acute poliomyelitis & polioencephalitis 11 12. Acute infectious encephalitis 12 13. M.—Cancer of buccal cavity and oesophagus (males only) MI13 14. Cancer of stomach and duodenum 14 15. Cancer of stomach and duodenum 14 15. Cancer of Breast 15 16. Cancer of all other sites 16 17. Diabetes 17 18. Intra-cranial Vascular Lesions 18 19. Heart Disease 19 20. Other diseases of the Circulatory System 20 21. Bronchitis 21 22. Pneumonia 22 23. Other Respiratory Diseases 23 24. Ulceration of the Stomach or Duodenum 24 25. Diarrhoea (under 2 years	2 1		1 1 1	1 1 1 1 1 1 1 1 1	2 2 6 4 10 3	4 1 9 23 2	9 23 33 1 3 2	

COMPARATIVE TABLES FOR THE PAST FOUR YEARS.

Birth Rates Dursley Rural District.

1947	17.4					
1948 1949	18.1 15.8	1950 H	England	&	Wales	15.8
1950	15.6					 20,0

Death Rates Dursley Rural District.

1947	10.8	
1948	9.3	
1949	12.03	1950 England & Wales 11.6
1950	11.4	

Average age of death, Dursley Rural District.

1947		
1948	63.5	years
1949	61.3	years
1950	64.88	years

Infant Mortality Rates, Dursley Rural District.

1947	23.9	
1948	19.6	
1949	22.6	1950 England & Wales 29.8
1950	29.9	C:

From these comparison tables a few observations can be made. Firstly, the birth rate has fallen considerably during the past 2-3 years. This may be due to many factors, but one of the most important, in my estimation, is the shortage of housing accommodation for young married couples. Living with in-laws causes a big strain in the early years of married life and does not lead to increases in family. I think the Housing Committee should take cognisance of this fact when new allocations of houses are received from the Ministry. There may be more need now for two-bedroomed houses than the larger types. With the transfer system now working, families could be graded up according to size. I believe that the Lettings Committee should also take into consideration the childless married couple who has a medical history of not being able to have a family. This type of couple are usually excluded from re-housing because of lack of family. They are usually doomed to live with in-laws or in rooms and therefore miss the satisfaction of building up a home of their own.

I have no remarks to make about the death rate except to say that it usually remains below the average for England and Wales. The average age of death is fairly high and points to the advances that have been made in medical science, social medicine and environmental hygiene.

The Infant Mortality Rate has remained about the level of that of England and Wales as a whole.

It is difficult to make general observations on infant mortality rates from such small figures as are available in this district.

3.—DIPHTHERIA IMMUNISATION

This Scheme has continued to progress, thanks to the co-operation of the General Practitioners, District Nurses, Health Visitors and School Teachers not to speak of the parents.

Age at 31.12.50 i.e., Born in Year	Under 1 1950	1949	2 1948	3 1947	4 1946	5-9	1936—40	Total Under 15
Number Immunised	3	216	249	259	185	1,351	769	3,032
Estimated Mid-year Child Population 1950		Children un 1,463	under 5			Children 5—14 2,716	-14	4,179

Percentage of Child Population under 15 years of age who have completed a course of Diphtheria Immunisation— No cases of Diphtheria were notified during 1950.

temporarily for a few months during the prevalence of Anterior Poliomyelitis in the district. However, there is a and therefore it is unnecessary to have the child immunised. This is a very false view to take. There is nothing more This figure shows a decrease from last year but this is probably due to the fact that immunisation was suspended certain amount of inertia among parents about immunisation—some feel that Diphtheria as a disease has disappeared certain than that if the immunisation scheme breaks down or falls below a certain percentage, diphtheria will return with its old virulence. All interested in Public Health, generally, must put over this view to parents.

INFECTIOUS DISEASES IN AGE GROUPS, 1950

TOTAL	16		₩	6	₩	freed		6	T. Carlotte	110	32			
Age unknown														
Over 65 years														į
45—65 years				4	y-red									
35—44 years														
20—34 years			-					8		-				
15—19 years								2		-				
10—14 15—19 20—34 35—44 45—65 years years years years										-				
6—9 years	10			2						25	9			
4—5 years	4							~		35	6			
3 years										15	9			
2 years										20	∞			
1 year								—		9	2			
Under 1 year										N	-			
DISEASE	Scarlet Fever	Diphtheria	Puer. Pyrexia	Pneumonia	Erysipelas	Dysentery	OphthalmiaN.	Anterior Polio	Malaria	Whooping C.	Measles	Cereb. Sp. M.	Typhoid	Undulant Fev.

STATISTICS
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	Dursiey Rural District	England and Wales	126 County Boroughs and Great Towns (including	148 Smaller Towns in England and	London Adminis- trative
			London)		
Deaths					
All Causes	11.4	11.6	12.3	11.6	11.8
Typhoid and Paratyphoid Fevers	0.00	0.00	0.00	0.00	0.00
Whooping Cough	0.05	0.01	0.01	0.01	0.01
Diphtheria	0.00	0.00	0.00	0.00	0.00
Tuberculosis	0.23	0.36	0.42	0.33	0.39
Influenza	0.00	0.10	0.00	0.10	0.07
Smallpox	0.00	0.00	0.00	0.00	0.00
Acute Poliomyelitis	0.11	0.02	0.02	0.02	0.01
Pneumonia	0.35	0.46	0.49	0.45	0.48
Notifications (Corrected)					
Typhoid Fever	0.00	0.00	0.00	0.00	0.00
Paratyphoid Fever	0.00	0.00	0.00	0.00	0.00
Meningococcal Infection	0.00	0.03	0.03	0.02	0.03
Scarlet Fever	0.93	1.50	1.56	1.61	1.23
Whooping Cough	6.44	3.60	3.97	3.15	3.21
Diphtheria	0.00	0.05	0.03	0.02	0.03
Erysipelas	0.05	0.17	0.19	0.16	0.17
Smallpox	0.00	0.00	0.00		1
Measles	1.80	8.39	8.76	8.36	6.57
Pneumonia	0.50	0.70	0.77	0.61	0.50
Acute Poliomyelitis	0.58	0.18	0.17	0.17	0.13
Food Poisoning	0.05	0.17	0.16	0.14	0.25
	Rates per 1,000	Live Births			
	29.9	29.8	33.8	29.4	26.3
of age	3 6	1	,,	1 6	0
(Corrected)	Rates ner 1 000	Total (Ligge and	Still Rixthe	0.1	1.0
exia	3.6			4.33	6.03

INFECTIOUS DISEASES.

Whooping Cough.

During the year this area has been comparatively free from infectious disease except for an undue prevalence of Whooping Cough. There were 110 cases notified by General Practitioners and there may have been many milder cases not seen by the doctor and therefore not notified. The epidemic started early in the year in Wotton-under-Edge and gradually spread during the summer months to the Dursley area. The notifications were continuous right through the year and reports from General Practitioners show that the disease was mild in character with few complications. However, it must not be forgotten that Whooping Cough is a disease of childhood which can do untold harm. It often leaves a weakness in the lungs predisposing to attacks of Asthma, Bronchitis and even Tuberculosis.

There was one death from the disease in a child of one year.

The age groups are interesting:—

Uı	nder 1 year		 5	cases
	year old		 6	cases
2	years old		 20	cases
3	years old		 15	cases
4	- 5 years old		 35	cases
6	- 9 years old		 25	cases
10	- 45 years old		 4	cases
		Total	 $\overline{110}$	cases

It is obvious from these figures that Whooping Cough mostly affects children under 10 years, and that infection may therefore spread through close contact at Child Welfare Centres and Infant Schools as well as at Sunday Schools and other sundry places where children of that age gather together.

Parents have a tremendous responsibility in stopping the spread of infection by prompt calling-in of their General Practitioner and keeping the child isolated as much as possible until the whooping and other symptoms have cleared up. Unfortunately the early symptoms of the disease are so mild in these days that mothers are neglectful of isolation and so the epidemic progresses. A child does not need to whoop to be diagnosed as Whooping Cough. I think that if a child is waking up at night and coughing in spasms followed by vomiting then in most cases it should be diagnosed as Whooping Cough and the child isolated.

I feel that teachers in infant and junior schools can do a lot to stop the spread of the disease by sending children home during epidemic times because of a severe cough in the classroom.

Experiments have been held by the Medical Research Council in different parts of the country to determine the adequacy of the various whooping cough Prophylactic Serums in use. These have all been carried out with control groups of children and the preliminary reports show that one of the Serums used may be very beneficial in making this damaging disease of children into a very mild form of infection. In many cases this new Serum has prevented an attack or if the child is infected then the attack is very mild in character.

It is to be hoped that soon the Medical Research Council will see its way to advise the Ministry that Whooping Cough Innoculation is worth while so that we can get rid of this scourge in a similar manner to Diphtheria.

ANTERIOR POLIOMYELITIS.

There were 10 cases of Acute Anterior Poliomyelitis notified by General Practitioners during the year—one of these was later diagnosed as an Acute Osteo-Myelitis, after admission to hospital. Of the remaining nine cases, three of these occurred in the Wotton-under-Edge area and six in the Cam-Coaley-Dursley area. One of the Wotton cases—a girl of 9 years—died from the disease shortly after admission to hospital and one of the Dursley cases—a child of 4 5/12 years—died two months after admission to hospital.

Sex and Age.	Amount of Damage.	Prognosis.
1. Female, 9 years.	Extensive Paralysis.	Died in hospital.
2. Male, 28 years.	Paralysis of shoulder and muscles of respiration	Still has some residual weakness in the muscles of the shoulder girdle and the accessory muscle of respiration. He is still under the care of the Physiotherapy Department.
3. Female, 2 years.	Facial paralysis and back weakness.	Slight left facial paralysis remaining which has not progressed in past six months.
4. Female, 19 years.	Paralytic.	Some degree of paralysis in both legs, some of which may be permanent. Still attends Physiotherapy Department for treatment.

Sex and Age	Amount of Damage	Prognesis
5. Male, 17 years.	Moderate Paralysis.	Residual weakness in the left arm—still wearing a splint with springs to the fingers. Slight weakness in left foot which is responding to Physiotherapy treatment very well.
6. Female, 4 5/12 years.	Extensive Paralysis.	Died in hospital with a collapsed lung.
7. Male, 21 years.	Paralytic and Bulbar—severe.	When admitted to hospital this patient had paralysis of arms, shoulders, abdominal muscles, back, legs and right eye. He recovered considerably in hospital but still has moderate paralysis of his arm.
8. Male, 33 years.	Paralytic.	Complete recovery.
9. Female, 1½ years.	Paralysis of left arm and back.	Complete recovery.

It can be seen from the ages of those affected that the term Infantile Paralysis used by the lay press gives a very false impression of the type of individual affected by the disease. It is a disease that does not discriminate between poor or rich, child or adult. None of the cases in this District had any obvious contact with each other, although they all occurred within three months—August to October. At that time, of course, the disease was prevalent all over the country. I am more than convinced that a large proportion of the population are immune to this virus disease and that during epidemic times the remaining portion build up a resistance without symptoms, have a mild attack or else succumb to the disease.

The virus now can be isolated but the method of spread is still at variance. Most authorities are inclined to think that it is more likely to be faecal spread rather than droplet infection but this has never been proved conclusively. There is no doubt that it is a crippling disease and can be most frightening during epidemic times, but I do feel that the press make too much headline out of it and thus scare the local population when a few cases arise in a district. The press could do a lot more good by making headlines of Whooping Cough Epidemics or undue prevalence of Tuberculosis in an area. In the latter case, Housing Authorities might take more notice of the needs for re-housing Tuberculous families, if this were done.

There is, as yet, no specific treatment for Anterior Poliomyelitis, but physiotherapy has made big strides in eradicating residual paralysis in those who were formerly crippled for life. We are very lucky in this District in having a Physiotherapy Department in the town of Dursley, and I do feel that this has helped, in no small way, to speed the recovery of those left with residual paralysis.

TUBERCULOSIS.

During the year 1950 big strides were made by the Gloucestershire Chest Physician to clear up the Tuberculosis Register of the District.

At the beginning of the year the figures were: -

Pulmonary	Non-Pulmonary	Total	
Males. Females.	Males. Females.		
74 63	22 11		
Total 137.	Total 33.	170 cases.	

At the end of 1950 there was a big change:—

Pulmonary.	Non-Pulmonary.	Total
Males. Females.	Males. Females.	
44 33	10 10	97 cases
Total 77	Total 20	

This large reduction in the Register is due to better cooperation between the Chest Physician and the Public Health Department. The cases stroked off the Register are those cured, died, or left the area.

The Chest Physician is taking a keen interest in the Dursley Area and has specified it as an area where he is attempting to eradicate the disease by certain measures.

- 1. Getting to know the problem and sources of infection.
- 2. Early admission of Tuberculous cases to hospital.
- 3. Tuberculin Testing of school children and contacts with the probable use of B.C.G. Vaccination.
- 4. Better co-operation with the Housing Authority in relation to the re-housing of Tuberculous families.
- 5. More Mass Radiography especially in works and senior Schools.
- 6. Help for the Tuberculous through the local T.B. After-Care Committee.
- 7. Publicity about Tuberculosis to educate the public in means of stopping the spread of infection.
- 8. Co-operation with the Public Health Department in Preventive Action.

Twenty-five new cases of Tuberculosis were notified during the year and five former cases were re-registered. There were four deaths from the disease. In relation to housing of tuberculous families, the Health Department have had the co-operation of the Lettings Committee. Eight families were actually re-housed in this area during 1950 upon grounds of Tuberculosis. I feel certain this is one of the most important steps that can be taken from a preventive action as overcrowded conditions and bad property certainly lead to the spread of the disease. I might say that all new notifications are now reported on by the Health Visitor or Sanitary Inspector and if a bad report is received on the housing conditions, then the case is taken up with the Lettings Committee.

AGE	NEW CASES				DEATHS				
	Respiratory		Respiratory Non-Resp.		Resp.	Respiratory		Non-Resp.	
	Male	Female	Male	Female	Male	Female	Male	Female	
0— 1— 5— 15— 25— 35— 45— 55— 65 and upwards Age unknown	1 2 4 3 1 1	1	1 2	3	1	1		1	
Totals	12	5	3	5	2	1		1	

Average age of death from Tuberculosis during the year—34.2 years.

DURSLEY AND DISTRICT AFTER-CARE COMMITTEE FOR THE TUBERCULOUS.

In my last Report, I mentioned that this Committee was being established in the District. It is a purely voluntary Committee under the auspices of the Central Area of Gloucestershire Health Sub-Committee, and affiliated to the National Association for the Prevention of Tuberculosis.

During their first year of office, quite a lot of useful help has been given to Tuberculous families in the district. Examples of the type of assistance given are:—Clothing for a child whilst

in hospital; grant to patient going to Switzerland for treatment; payment of wireless licence for patient; gift of blankets to patient; payment of bus fares of relatives going to visit patients in sanatoria, etc. The object of the Committee is to help those T.B. patients in need. Unfortunately, the social services do not cover a lot of these needs when a patient is away from work due to a long term illness, and so voluntary Committees capable of raising funds are still necessary. At the end of the year the Committee had in hand approximately £110. This has been raised by voluntary efforts such as a whist drive, jumble sale, subscriptions from local firms, and the proceeds from selling seals The Committee were also very and cards at Christmastide. pleased to get a nice subscription from the Wotton-under-Edge District Ambulance Fund upon its being wound up when the County took over its Ambulance Services.

One of the main purposes of this Committee is to co-ordinate the Voluntary Services available for help. For this reason the British Legion, the British Red Cross, local Welfare Organisations and S.A.F.F.A. are all represented on the Committee. All the knowledge about the patient's needs, is brought to the committee through the Chest Physician, the Medical Officer of Health, the Social Welfare Worker of Standish Sanatorium, the Health Visitors, or the general Committee Members.

Also represented on the Committee are the National Assistance Office, whose officer can often give very helpful advice. The Housing Manager of the Council can be very useful on this Committee to give help and advice re the possibility of re-housing when necessary.

At Christmas a monetary gift was given to all children on the Register and to all bedridden patients. This festive present was very much appreciated by all those who received it.

The Committee have in hand a scheme for the provision of libraries, both in Dursley and Wotton-under-Edge, to serve Tuberculous persons. In the formation of this, they have had the co-operation of the British Red Cross who are supplying the majority of the books. These books are being distributed to the infective patients by the Health Visitors so that they do not use the Public Library facilities.

The Committee have been very fortunate in their first year of working to have a very enthusiastic Chairman, a most efficient Secretary, and a Treasurer who knows the job.

I do feel that this Voluntary Committee should be given every support by the members of the Council and public at large, as they are carrying out an important function, i.e., the aftercare of tuberculous patients.

DURSLEY RED CROSS PHYSIOTHERAPY CLINIC.

I am indebted to Mr. J. K. Munro, Physiotherapist in Charge, for the undermentioned Report on the working of the Clinic during 1950.

It is now almost three years since the opening of the Dursley Red Cross Physiotherapy Clinic, in which time 44,522 treat-

ments have been given.

The figures from June, 1950, to May, 1951, are as follows:
Attendances 7,271
Treatments 15,116

The conditions treated are in much the same proportion as stated in last year's Report, namely:—

An interesting fact is that during the past year with the Arthritic patients, we have treated a greater number suffering from Osteo-Arthritis than Rheumatoid Arthritis. Although the highest percentage of our work is connected with the treatment of patients suffering from Arthritic conditions, it is by no means a monotonous job. These conditions have a great deal in common and it is interesting to observe the minor differences in each individual—the patient's attitude to the conditions and their reaction to treatment; to note their observations on the effect of the existing weather conditions on their complaint. No two patients agree on exactly how the weather affects them but they all bring the weather in, whenever they are questioned about the cause of their complaint.

Although Physiotherapy cannot be regarded as a cure for Rheumatoid and Osteo-Arthritis, the efforts in this field have been reasonably well rewarded and it gives us great pleasure here to be able to say that we have had few sufferers who have not benefited considerably from Physiotherapy treatment.

There are now five members of Staff in the Department, which lightens the burden, on the limited staff which was available in the early stages of the Centre.

HOUSING.

System of Allocation:

(a) The waiting list for Council houses which was formerly held in separate parishes has now been integrated into one large waiting list including every parish, and houses are let by a Central Letting Committee of which every Councillor is a member; houses being let to applicants on the waiting list from any parish. The Points System has been completely overhauled and brought into line with the most recent recommendations of the Housing Management Sub-Committee of the Central Housing Advisory Committee appointed by the Minister of Health. Graduated points are now awarded for the following factors in respect of each housing application:—

(i) Family Size.

- (ii) Lack of a separate home.
- (iii) Unsuitable accommodation.
- (iv) Ill health or physical disability.

(v) War service.

(vi) Length of residence in district.

Consideration is also being given to the following factors:

Place of Employment; Place where the applicant would wish to live; and amount of weekly rent which applicant could afford to pay.

- (b) There are 525 applicants on the Central Housing List including all parishes.
 - (c) There are 140 young married couples with no children. There are 117 young married couples with one child.

The Council have set up a system by which tenants may transfer from one house to another and in this way the young couple with a growing family who occupy a two-bedroomed house may be transferred to a three-bedroomed house, thus vacating the smaller house for an applicant on the list having one child. There is no compulsion used in order to effect these transfers of tenancy, but mutual benefit is obtained between the tenants concerned. There is a need for more two-bedroomed houses in this district in order to facilitate the working of this transfer system.

Housing Act, 1949

In my last Annual Report I recommended to the Council that they should adopt the above Act. They have not yet felt it advisable to do so, but I should like to repeat my remarks of last year, that I consider much good work for the improvement of houses in this area could be carried out under the provisions of the Act.

8.—MILK SUPPLY

During the year 84 samples of milk have been taken for bacteriological examination, and 9 results were unsatisfactory.

The results of all bacteriological samples of milk are sent to the County Milk Productions Officer of the Ministry of Agriculture and Fisheries. The reason for this being that the Ministry of Agriculture and Fisheries are now the responsible Authority for the production of milk, and they are then able to check up on unsatisfactory samples. There is some doubt as to whether this work is being carried out satisfactorily, as cases have come to our notice where after sending results of unsatisfactory samples to the County Milk Productions Officer no visit has been made to the farm concerned by a member of the staff. It will be appreciated that a quick check up at the farm is essential, after an adverse result on a milk sample is received, in order that the necessary improvements in production methods is achieved. Regular inspections of cowsheds are also just as essential and when these are not carried out many farmers are apt to become careless in their methods and less diligent about the cleanliness of their premises. There is good reason to believe that this side of clean milk production is also being neglected at the moment. In my opinion it is to be regretted that the responsibility for this work was taken from Local Authorities under the Milk Regulations, 1949, and I feel that sometime in the not too distant future this responsibility should be again returned to Local Authorities.

A total of 36 samples were taken for biological examination during the year, and three results were positive. The matter was reported to the Divisional Veterinary Surgeon, and a cow in each of two herds was dealt with under the Tuberculosis Order. Both cows when slaughtered were found to be suffering from Tuberculosis.

This is considered an essential work as one cow's milk which is affected with tuberculosis would be capable of contaminating a very large bulk of milk, and in turn this would be liable to infect many people consuming the milk.

I am pleased to record that we now have a modern pasteurising plant in the area which handles tuberculin tested milk only. This pasteurised supply is sampled regularly by the County Sanitary Officer, and has proved to be very satisfactory.

During the year a paper entitled "Bovine Tuberculosis and Our Milk Supply" was given by the Deputy Sanitary Inspector at a Sanitary Inspectors' Branch Meeting held at the Council Offices, Dursley. This paper was well appreciated and as a result was later published in "The Sanitarian," the official journal of the Sanitary Inspectors' Association.

As a result of a case of undulant fever occurring outside our area which was thought to be caused by milk produced in

this area, 21 samples of milk were taken from the farm concerned. The brucella abortus organism was isolated in some samples, and action was then taken to ensure that the milk supply from the farm was pasteurised before consumption. The Divisional Veterinary Surgeon carried out the necessary clinical examinations and further milk samples were taken. Excretion of the brucella abortus organism was found to be intermittent and no specific cow could be traced as the offender. Pasteurisation of the milk supply was therefore continued until negative milk samples results were received, and the Divisional Veterinary Surgeon was satisfied that the herd was free from infection.

Owing to the intermittent excretion of the brucella abortus organism by cows it is not considered possible to take full proof action to ensure the milk supply is entirely safe and I feel that the pasteurisation of all milk is the only answer to ensure a milk supply free from the organisms of brucella abortus, tuberculosis, and all the other milk borne infections.

9.—ICE CREAM

38 samples of ice cream were taken during the year for bacteriological examination and the results of the methylene blue test are as follows:—

Grade	1	 19
Grade	2	 12
Grade	3	 4.
Grade	4	 3

In addition to being submitted for the methylene blue test the samples were examined for B.Coli and the plate count. The variation in the results obtained from the plate count examination and the methylene blue test are such that the interpretation of results is difficult.

It will be noted that the results of the ice cream samples are an improvement on those for the previous year.

18 ice cream samples were taken for the examination of fat content and non-fatty solids. The average of these results is as follows:—

9.2% fat content. 37.6% non-fatty solids.

These results are a definite improvement on the previous year's results.

Routine inspections have been made of the premises in which ice cream is produced, and routine inspections have also been made of premises and mobile vehicles from which ice cream is retailed.

It is interesting to note that during the year the number of premises registered for the sale of ice cream has increased by 13.

10.—MEAT AND FOOD INSPECTION

The inspection of meat and food is one of the important duties carried out by the Public Health Department, and below is given a detailed list of the foodstuffs voluntarily surrendered during the year. This list shows a wide variety of foodstuffs which are inspected.

LIST OF FOODSTUFFS CONDEMNED

BEANS IN TOMATO SAUCE

22 tins, approx. weight 18lb. loz.

BEETROOT

3 tins, approx. weight 3lb. $12\frac{1}{2}$ oz.

CAKE

14lb. 2oz. layer cake.

CEREALS

1 Packet Weetabix (small)

2 Packets Porridge Oats, approx. weight 2lb.

Ground Rice, approx. weight 90lb.

1 Packet Macaroni, approx. weight 1lb.

7 Packets Macaroni Rice, approx. weight 7lb.

1 Packet All Bran, approx. weight 10oz.

1 Packet Flour, approx. weight 1lb.

CHEESE

Danish Cheese, approx. weight 24lb. English Cheese, approx. weight 6lb.

1 Packet Italian Cheese, approx. weight 8oz.

CHOCOLATE DRINK

Canadian Milk Chocolate Drink, approx. weight 40lb.

COFFEE

1 tin Néscafe, approx. weight 4oz.

DRIED FRUIT

Currants, approx. weight 17lb. Raisins, approx. weight 30lb.

FAT

12 Packets Danish Fat, approx. weight 12lb. 7 Packets Suet, approx. weight 3lb. 8oz. Butter, approx. weight 2lb.

FISH (FRESH)

2½ Stone Cod's Roe Cod Fillet, approx. weight 14lb.

FISH PASTES

1 Tin Crab Paste, approx. weight 3\delta oz. 77 Tins Cod's Roe Paste, approx. weight 7lb. 5oz.

JAM

3 Tins, approx. weight 6lb. Apricot Pulp, approx. weight 20lb.

MARMALADE

1 Tin Marmalade, approx. weight 11b. 8oz.

MEAT PUDDINGS

2 Tins Steak and Kidney Pudding, approx. weight 2lb.

MINCEMEAT

4 Jars Mincemeat, approx. weight 3lb. 10oz.

PICKLE

1 Bottle

PUDDING MIXTURES

2 Packets Pudding Mixture, approx. weight 11b. 8oz.

RABBIT (TINNED)

4 Tins Rabbit, approx. weight 4lb.

RABBIT (FRESH)

24 Imported Frozen Rabbits

SAUSAGES

Pork Sausages, approx. weight 15lb. Beef Sausages, approx. weight 24lb.

SPAGHETTI

4 Tins Spaghetti, approx. weight 1lb. 8oz.

SUGAR

Sugar, approx. weight 29lb.

SYRUP

1 Tin Syrup, approx. weight 2lb.

SOUPS

4 Tins Vegetable Soup, approx. weight 4lb.

1 Tin Tomato Soup, approx. weight 1lb.

1 Tin Meat, approx. weight Ilb.

1 Tin Broth, approx. weight $4\frac{1}{2}$ oz.

2 Packets Oxtail Soup, approx. weight $3\frac{1}{2}$ oz.

TEA

Tea, approx. weight 4oz.

TINNED FISH

6 Tins Salmon, approx. weight 4lb. $13\frac{1}{2}$ oz.

1 Tin Herrings

1 Tin Crawfish, approx. weight 8oz. 2 Tins Mackerel, approx. weight 6oz.

5 Tins Sardines, approx. weight 11b. 6oz.

1 Tin Shrimps, approx. weight $3\frac{3}{4}$ oz.

5 Tins Dutch Herring Roes, approx. weight 2lb. 3oz.

TINNED FRUIT

5 Tins Plums, approx. weight 3lb. 8oz.

1 Tin Gooseberries

2 Tins Pineapple, approx. weight 2lb.

3 Tins Pears, approx. weight 2lb. 8oz.

1 Tin Damsons, approx. weight 1lb. 13oz.

1 Tin Grapes

1 Tin Peaches

TINNED MEAT

15 Tins Luncheon Meat, approx. weight 20lb. 3oz.

4 Tins Pork Luncheon Meat, approx. weight 9lb. 11oz.

1 Tin Veal and Ham, approx. weight 1lb. 2oz.

1 Tin Galantine, approx. weight 12oz.

Pressed Beef, approx. weight 31lb.

1 Tin Beef and Pork Loaf, approx. weight 12oz.

9 Tins Dutch Luneheon Meat, approx. weight 9lb.

1 Tin Veal Loaf, approx. weight $11\frac{1}{2}$ oz.

6 Tins Jellied Veal, approx. weight 36lb. 10oz. 1 Tin Cooked Ham, approx. weight 11lb. 15oz.

3 Tins Mexican Meat (with Gravy), approx. weight 3lb. 12oz.

TINNED MILK

2 Tins Evaporated Milk, approx. weight, equivalent to 4 pts.

5 Tins Skimmed Milk, approx. weight equivalent to $7\frac{1}{4}$ pts.

12 Tins Condensed Milk, approx. weight equivalent to 16 pts.

4 Tins Full Cream Milk, approx. weight equivalent to $7\frac{3}{4}$ pts.

5 Tins Unsweetened Milk, approx. weight equivalent to $7\frac{3}{4}$ pts.

TINNED PEAS

19 Tins English Peas, approx. weight 20lb. 5oz.

1 Tin French Peas, approx. weight 11b.

1 Tin Dutch Peas, approx. weight 1lb.

TINNED VEGETABLES

7 Tins Carrots, approx. weight 9lb. 13oz.

TOMATOES

31 Tins Tomatoes, approx. weight 35lb. 10oz. 1 Tin Tomato Puree, approx. weight 11b. 6oz.

VEGETABLES MIXED

4 Tins Mixed Vegetables, approx. weight 3lb. 6oz.

APPROX. TOTAL WEIGHT: 5 cwt. 1 qr. 26ib. 8oz.

H.—FOOD PREMISES

During the year routine inspections of food premises were made and improvements have been carried out at many, as a result of informal notices. It is evident, however, that much work has yet to be carried out in educating both employers and employees in the correct and careful handling of foodstuffs.

12.—SAFE FOOD CAMPAIGN

The Ministry of Food's Model Byelaws with respect to the Handling, Wrapping and Delivery of Food, and Sale of Food in the Open Air were adopted by the Council during the year under Section 15 of the Food and Drugs Act, 1938.

After the byelaws were confirmed, meetings of the traders throughout the district were called in order to explain and discuss the byelaws with them and to show them films on Safe Food. Then meetings of employees were called and the same procedure adopted. The films shown were: "Another Case of Food Poisoning," "Insect Pests in Food Establishments," "A Good Housewife in her Kitchen," and "A Fly About the House." The meetings were well attended, and it is considered that they did much to enlighten the personnel in the food trade on how to store and handle foodstuffs.

In order to stimulate the general public's interest in safe food, arrangements are now being made to hold a Safe Food Exhibition in Dursley during 1951.

13.—LABORATORY SERVICES

During the year bacteriological and chemical examinations of water, ice cream, foodstuffs and faeces, and biological and bacteriological examinations of milk have been carried out by the Public Health Laboratory, Bristol.

Chemical analysis of sewage works effluents, crude sewage, and trade wastes have been carried out by Mr. Rowland Ellis, the Public Analyst, Gloucester.

14.—FACTORY INSPECTION

Routine inspections of factories in the area have been made and informal notices served where necessary. It was not found necessary to serve any Statutory Notices.

15.—FUME NUISANCE

Following Messrs. R.A. Lister & Co.'s unsuccessful attempt to overcome the emission of hydrochloric acid fumes from their tinning shop they were asked to install a properly constructed scrubber.

The construction of this scrubber is now well in hand and should be completed in the near future.

16.—HYDROGEN CYANIDE (FUMIGATION) ACT, 1937

During the year the Draycott Flour Mills, Cam, have had a routine fumigation of their premises carried out by the use of hydrogen cyanide. This fumigation is carried out as a preventive measure against infestation by flour mite and other pests.

17.—MORTUARY ACCOMMODATION

The Council has its own Mortuary and Post-Mortem room at Wotton-under-Edge, and during the year certain repair works and re-decoration works have been carried out. The Mortuary has been run efficiently during the year.

18.—INSECT PESTS

Occasional heavy infestations of flies in the roof space of houses have been successfully dealt with by the use of D.D.T. Smoke Generators.

All school rooms in which meals are taken, school kitchens and school canteens throughout the area have also been treated by means of D.D.T. Smoke Generators as a preventive measure against fly infestation. This action has proved to be well worth while.

Unfortunately two cases of bed bugs were brought to our notice during the year, one of which was in a Council House. Both infestations were dealt with successfully.

WOOD WORM

During the year our advice was sought in a case in which wood worm became very active in furniture and house timbers.

Samples of the affected wood were sent to the Forest Products Research Laboratory, and expert advice was received on the manner in which the problem should be tackled.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

In order to carry out the provisions of the above Act, which came into operation on the 31st March, 1950, the Council appointed a full time Pest Officer.

It was decided to give a free service for domestic premises, and to make a charge for treatments carried out at business premises.

During the period 1st April, 1950, to 31st December, 1950, the following work was carried out:—

913 Inspections of domestic premises.

163 Treatments of domestic premises.

128 Inspections of business premises.

108 Treatments of business premises.

43 Inspections of farms.

In addition to the above work regular inspections and treatments of the Council's refuse tips, and sewage works have been carried out. The Council's sewers in Dursley, Cam and Wotton-under-Edge have also been test baited and treated if that has been found necessary.

All infestations of farms have been reported to the Gloucestershire Agricultural Executive Committee and in many cases farmers have agreed to have the necessary treatments carried out by the Rodent Operator working under the control of that Committee. In other cases farmers have undertaken the work themselves, and in a few cases the Council's Pest Officer has earried out the necessary treatments and the usual charge for business premises made.

It was found that approximately 50% of the cases of rat infestation were at premises where pigs, chicken or rabbits have been kept; probably due to the fact that all too often quantities of feeding stuffs have been carelessly left about. In 20% of the cases of infestation it was found that general untidiness about premises and general disrepair of premises has been the reason for the harbouring of rats.

Many infestations dealt with have been of long standing, and the public appear to have been loath to report the matter fearing that they would have to pay for the necessary treatments. Probably the reason for this is that prior to the 1st April, 1950, a charge for treatments was made by the Gloucestershire County Council.

PART II

REPORT OF ENGINEER AND SURVEYOR AND CHIEF SANITARY INSPECTOR

The Staff in the Department of the Engineer and Surveyor consists of:—

Technical Assistant C. G. Thomas

General and Costing Clerk A. W. Sutton

Two Articled Pupils R. L. Herrick and
J. K. Frapwell

Mr. Chairman, Sir, Ladies and Gentlemen,

I have pleasure in presenting my report for the Year 1950.

Good progress has been made in all departments, particularly in the provision of New Houses—128 having been completed during the year and in October the Council completed the erection of their 1,000th house.

In February, 1949, the Council decided to appoint an Architectural Assistant and though there was considerable delay before the appointment was made, Mr. R. Edwards, who is a qualified Architect, was appointed in March, 1950, and took up his duties on the 1st May, 1950. The appointment, I am certain, was a wise decision on the part of the Council as it now enables the Council to carry out the entire New Housing Programme without the aid of Consultant Architects and this has many advantages from an administrative point of view.

Throughout the year certain re-arrangements in the Office accommodation were made, plans were prepared for the screening off of a portion of the Entrance Hall and a small compartment, adjoining the Rates Department was converted into a private office for the Chief Financial Officer. As a result of these alterations the whole of the Finance Department was transferred to the ground floor. The Housing Manager was transferred to an Office on the First Floor and his former office was adapted as an office for the Architect. This arrangement although the best in the circumstances, is not altogether satisfactory the Architect being separated from my department and there is insufficient accommodation for a private office for At the first favourable opportunity consideration should be given to the provision of more adequate accommodation for my department in order to facilitate more efficient working conditions.

1.—NUMBER OF HOUSES COMPLETED SINCE THE WAR UP TO THE YEAR ENDING 31st DECEMBER, 1950

of to their difficultion of a following 1990	
(a) Completed under the Council's Engineer and Survey	or
Aluminium Bungalows	
Draycott, Cam 40 (temporary 2 Bedroom)	
Woodfield, Cam 71 (permanent 2 Bedroom)	
Woodfield, Cam 43 (permanent 3 Bedroom)	
Fairmead, Cam 9 (permanent 3 Bedroom)	- 0
Total 1	63
Swedish Houses	
Stinchcombe 4	
Uley 4	
Wotton-under-Edge (Mount Pleasant) 4	
North Nibley (Barrs Lane) 4 Total	16
Traditional Houses	10
Uley 6	
Draycott, Cam	
Total	26
Cornish Unit Houses	
Slimbridge (Tyning Crescent) 16	
Coaley, Betworthy 8	9.4
Total	4
$\overline{2}$	29
(b) Completed under Consultant Architects	
Airey Houses	
2	
North Nibley, Innocks	
Slimbridge, Tyning Crescent8	
Coaley, Hams Hill 8	
Wotton-under-Edge, Fountain	
Crescent 12	- 0
Total	50
Stent Houses	
Kingshill, Dursley 66	66
Total Traditional Houses	00
Wotton-under-Edge, Mount Pleasant 40 Wotton-under-Edge, Fountain Cres. 8	
Fairmead, Cam	
Total	84
2	00

Total by Engineer and Surveyor 229 Total by Consultant Architects 200 Total by Private Enterprise 44 473 Houses
NUMBER OF HOUSES IN PROCESS OF BUILDING IN 1950
(a) Under the Council's Engineer and Surveyor Aluminium Bungalows Woodfield, Cam
Cornish Unit Houses Slimbridge, Tyning Crescent 20 Coaley, Betworthy 22 Kingswood 10 Total 52
(b) Under the Consultant Architects
Permanent Houses
Fairmead, Cam
160 Houses
NUMBER OF HOUSES COMPLETED IN 1950 (a) Under the Council's Engineer and Surveyor Aluminium Bungalows
Woodfield, Cam 43 Fairmead, Cam 9 Total 52
Cornish Unit Houses
Slimbridge, Tyning Crescent

(b) Under the Consultant Architects

Permanent Houses

Fairmead, Cam 36 Woodfield, Cam 8 Wotton-under-Edge, Fountain Cres. 8

Total 52

Total by Engineer and Surveyor ... 76 Total by Consultant Architects ... 52

128 Houses

Number of houses erected under Licence Private Enterprise during 1950 — 13 houses.

Families accommodated as a result of conversion, adaptation

or otherwise of old properties — 12.

2.—HOUSING ESTATE DEVELOPMENTS

Surveys were made, levels taken and layout plans were prepared for the following sites:—

Woodfield Site for 31 Aluminium Bungalows.

Woodfield Site for 12 Aluminium Bungalows.

Fairmead, Cam, Site for 9 Aluminium Bungalows.

Nympsfield Site for 12 Traditional Houses.

Tilsdown Site for 24 Houses.

Plans and Specifications were prepared for the following: —

12 Traditional Type Houses at Nympsfield.

6 Garages at Kingshill.

Retaining walls and provision of Handrails, Kingshill Estate.

4 Garages at Fairmead, Cam.

Specifications and Bills of Quantity were prepared for the following Road and Sewers Works:—

Nympsfield to accommodate 20 Houses and Disposal Works for a population of 135 persons.

Tilsdown to accommodate 36 Houses.

Woodfield, Extension No. 4, to accommodate 45 Houses

During the year the following works were completed:

Woodfield, Extension No. 2, comprising 2064 yards super of Carriageway and 168 yards lineal of Foul and Storm Water Sewers.

Woodfield, Extension No. 3, comprising 2173 yards super of Carriageway and 1700 yards lineal of Foul and Storm Water Sewers.

Coaley, Betworthy, comprising 1890 yards of Carriageway and 974 yards lineal of Foul and Storm Water Sewers and Disposal Works for a population of 88 persons.

3.—BUILDING LICENCES

Eighty applications were received and investigated and of these a total of fifty Licences were issued to a total value of £26,026. Licences for new dwellings are included in this figure.

Owing to the severe restrictions on the amount of money allowed for building purposes and also having regard to the severe restrictions on timber a great deal of time has to be spent on cheeking costs and quantities of timber.

4.—BUILDING BYELAWS

Plans were deposited for consideration and of those so deposited 147 were approved and 7 disapproved and 513 inspections made.

5.—SMALL DWELLINGS ACQUISITION ACT

Eleven inspections and valuations were made for advances under the above Act.

6.—WATER SUPPLY

In the 1949 Report a comprehensive report was given of the existing supplies and it is not therefore proposed to mention them again in detail as there has not been any material change.

The Greenhay Spring which was collected to augment the Wotton supply has proved valuable and samples taken were satisfactory on every occasion, but samples from Hamblins Brake, Wotton-under-Edge, still prove to be unsatisfactory. All the supplies, however, are chlorinated before reaching the consumer and all samples taken after chlorination have proved satisfactory.

The average consumption in the Northern part of the District for all purposes is 460,178 gallons per day. This is equal to 33.1 gallons per head per day, of which 27.1 gallons per head per day is for domestic purposes and 6 gallons per head per day for trade and agricultural purposes.

The average consumption in the Southern part of the District for all purposes is 150,000 gallons per day. This is equal to 29.5 gallons per head per day, of which 27.5 gallons per head per day is for domestic purposes and 2 gallons per head per day for trade and agricultural purposes.

Difficulties are arising in supplying adequately the District. In the northern half the greatest difficulty is one of storage and pumping. The maximum daily demand amounts to 481,000 gallons and the pumping plant is capable of delivering to the reservoir a maximum of 482,000 gallons daily and difficulty does arise in affording a sufficient supply of water in maximum

periods of consumption, particularly if there are electric power cuts. The storage capacity of the Reservoir is equal to only 11.5 hours' supply.

In the southern half, storage and distribution is the chief concern and during periods of severe drought the springs yield is barely sufficient to meet the demand and in fact during the extreme drought of 1949 the yield was actually 3,000 gallons per day short of requirements.

The difficulty in distribution is caused through the smallness of the size of the pipes. The District is fed from the Reservoir 500ft. O.D. at the North East of Wotton-under-Edge by one 4in, and one 3in, main. During peak periods of draw off, in the lower areas, the high levels on the North West of the town experience intermittent supply. Similar difficulties are experienced in Kingswood and the storage capacity is only equal to three-quarters of a day's supply.

From the above remarks it will be seen that the comprehensive scheme for the whole district now being prepared by your Consultant Engineers should be pressed forward as quickly as possible.

EXTENSIONS OF WATER MAINS DURING THE YEAR

- Tilsdown Housing Estate.—245 yards of 4in. C.I. Pipes have been laid.
- Coaley, Betworthy Estate.—345 yards of 3in. C.I. pipes have been laid.
- Nympsfield Housing Estate.—124 yards of 4in. C.I. pipes have been laid.
- Woodfield Extensions 2 & 3.—490 yards of 4in. C.I. pipes have been laid.
- Bushford Extension.—1000 yards of $1\frac{1}{4}$ in, gal. iron pipes have been laid.
- Cambridge Extension.—330 yards of 1½in. gal. iron pipes have been laid.

	Caswell Pumping Station	24.5.50		9	4		
	,						
ons.	Spring, Caswell Dursley	24.5.50		25	20		
Examinatic	Tap at No. 1, South St., Uley	11.5.50		0	0		
cteriological	Tap at Tickshill, Coaley	11.5.50		0	N	4	
ical and Ba	Tap at 13, The Bungalows, Draycott	11.5.50		∞	w		
Results of Chemical and Bacteriological Examinations.	Tap at 13, The Bungalows, Draycott	27.2.50		0	0		
Resu	Tap at Council Offices, Dursley	27.2.50		0	0		
	Tap at Kings- wood	27.2.50		0	0		
e Year 1950	Tap at 6, Wortley Road Wotton	27.2.50		0	0		
WATER SAMPLES TAKEN DURING THE YEAR 1950.		Parts per Million Date 180°C) Mineral Matter Loss on Ignition Chlorine as Chlorides Total Oxidised Nitrogen Nitrite Nitrogen Free Ammonia Albuminoid Ammonia	Total Hardness By Sodium Per. Hardness Versenate pH Metals Residual Chlorine	Bacteriological Examination Number of colonies perml. of original water developing at 37°C	At 20 —22°C	Probable number of Coli- Aerogenes organisms per 100 ml. of original water	Faecal B coli type I present/absent

Hamblin's Brake	12.9.50 400 350 50 13 0.99 nil 0.01 334 91 7.6 nil	28	1,010	45
Spring, Coombe Hall Farm, Wotton	24.5.50	20	17	0
Tap at House, Bath Rd., N'field	24.5.50	10	∞	0
Intake Tank Frogend Springs	24.5.50	36	30	present in 50 ccs.
Frogend Springs, Wotton	24.5.50	84	42	present in 50 ccs.
Coombe Pumping Station Wotton	24.5.50	Ŋ	0	0
Millend Pumping Station N. Nibley	24.5.50	10	12	O
Millend Pumping Station 'N. Nibley	24.5.50	ıv.	0	0
Caswell Pumping Station	24.5.50	4	0	0
	Parts per Million Date Total Solid Matter (Dried at 180°C) Mineral Matter Loss on Ignition Chlorine as Chlorides Total Oxidised Nitrogen Nitrite Nitrogen Nitrite Nitrogen Total Hardness By Sodium Per. Hardness Yersenate pH Wetals Metals Residual Chlorine Bacteriological Examination	original water developing at 37°C	At 20—22° C	Probable number of Coli- Aerogenes organisms per 100 ml. of original water Faecal B coli type I

Bottom Spring, Tyley Bottom		Top Spring, Tyley Bottom	Intake Tank, Frogend Springs	IVell, Fop St., Uley	Well, West Cott. Whisecourt Uley	Tap at The Ave., Stinch- combe	Tap at Little Acre, Wotton	Tap at 6, Innocks Estate, N. Nibley	Tap at 13, The Bungalows Draycott
Parts per Million Date Total Solid Matter (Dried at	12.9.50	12.9.50	12.9.50	12.9.50	12.10.50	24.10.50	24.10.50	24.10.50	2.11.50
180°C)	326 248 78	326 306 20	312 282 30	372 330 42	326 322 4				
Chlorine as Chlorides Total Oxidised Nitrogen Nitrite Nitrogen Free Annnonia	12 0.36 nil	0.23 0.23 0.11	0.83 0.83	16 2.48 trace 0.06	14 1.88 1.18				9.5 (SIII dilina) (SIII radiointro cum insequence)
	lin	lin	liiu	0.03	nil .				Ogeneneszekészek
Per. Hardness (by Soulum Per. Hardness (Versenate	96	737	264 72	302 67	274 62				Marie Carlotte Carlot
pH Metals Residual Chlorine	7.4 nil	7.4 nil nil	7.4 nil	7.4 trace nil	7.4 trace nil). Пр. Деней невойнева Тина Стар (пр. 2009)
Bacteriological Examination Number of colonies per ml. of original water developing at 37°C	16	63	150	360	320	N	21	. 12	
At 20—22°C	30	260	380	30,000	3.500	31	19	13	∞
Probable number of Coli- Aerogenes organisms per 100 ml. of original water		35	4	50	70	0	0	0	
Faecal B Coli Type I present/absent	And the second s	present	present	absent	present	0	0	0	

Well, Oxlpen View, South St., Uley	6.12.50 934 622 312 68 30.72 0.01 0.07 0.13 636 350 7.3 niil	10,800 8,000	900 present
South St., Uley	6.12.50 1386 - 975 411 97 39.17 trace nil 0.03 800 500 7.3	2.400	600 present
Well, South St., Uley	6.12.50 984 761 223 80 25.77 nil nil 0.03 648 365	2,800	95 present
Spring, Rockstoes, Uley	6.12.50	15.	80 present
Tap at 3, Wickwar Road, Kingswood	6.12.50	24 14·0	0 s bsent
Tap at Lampern View, Uley	21.11.50	31,500	70 present
Tap at 3, Wickwar Road, Kingswood	21.11.50	700 4,000	60 present
Tap at The Bridge Coaley	2.11.50	747	0 0
Tap at The Dairy, Dursley	2.11.50	36	0 0
	Parts per Million Date Total Solid Matter (Dried at 180°C) Mineral Matter Loss on Ignition Chlorine as Chlorides Total Oxidised Nitrogen Nitrite Nitrogen Total Hardness Per. Hardness Ph Metals Residual Cheorine Bacteriological Examination	Number of colonies per ml. of original water developing at 37°C At 20—22°C Probable number of Coli-	Faecal B Coli Type I per present/absent

Parish	Estimated Popula- tion, Based on Inhabited Properties	No. of Properties in Parish	No. of P connecte piped wat (includin pipe su	Houses supplied by Stand- pipes	
Cam	3,648 711 4,723 975 811 244 888 364 1,125 3,591 17,080	1,154 223 1,563 324 261 80 289 119 356 1,172	41 3 41 12 27 7 43 27 Uley 10 O'pen — 28	1,00% 175 1,426 258 119 60 194 86 244 1,037	52 53 70 39 40 4 41 6 47 — 127

CONNECTIONS TO WATER MAINS

During 1950 the following connections were made to the Council's water mains:—

Parish Dursley	No. of houses connected 5 115 22 26 3	Meter 2 4 8 10 2 7 12 1 1	Total 7 119 22 34 13 2 26 24 2 2
	204	47	251

7.—DRAINAGE AND SEWERAGE

Plans, Specifications and Bills of Quantity were prepared for the extension of the Council's Sewer at Sandpits, Dursley. This work comprised 630 yards lineal of 6in. pipes and 15 Manholes.

A full report was given in my 1949 Report of the drainage and Sewers throughout the district and there has been no material change.

Further gaugings of trade waste were given to the Con-

sultant Engineers for the Dursley and Cam areas.

The existing E.C.'s to the four Pre-war Council Houses at Moorend, Slimbridge, were converted to W.C.'s and the eight houses at Churchend, Slimbridge, were disconnected from the Septic Tank and connected to the new Disposal Works serving the Tyning Crescent Estate.

PUBLIC CONVENIENCES

Plans and Specification were prepared for a new Public Convenience at Cam.

8.—PUBLIC CLEANSING

Two controlled refuse tips were in use during the year, namely:—

- (a) Refuse Tip, Cross Roads, Slimbridge.
- (b) Refuse Tip, Old Brickfields, Wotton-under-Edge.

The control of fly and cricket infestation at the tips has been carried out by regular treatments with insecticides con-

taining D.D.T.

Unfortunately a fire broke out at the Slimbridge Tip which was believed to have been started by a tramp. The Fire Brigade was called and the fire was confined to only a small area of the tip.

No alteration to the actual refuse collection timetable was

made during the year.

During the year no special collections of waste paper were

made, but a small quantity was collected as trade refuse.

The Council have decided to exercise their power under Section 75 of the Public Health Act, 1936, to provide and maintain refuse bins and to make an annual charge of 5/- for each dustbin provided by them. This work was carried out on a small scale only during the year, but it is hoped that in the future much more work in this direction will be possible.

9.—HOUSING ACT, 1936

During the year four notices of Time and Place were served under the provisions of Section 11 of the above Act, and in each case an undertaking was given by the owner concerned that the house would not be relet for human habitation until it had been rendered fit for that purpose.

10.—SUMMARY OF SANITARY INSPECTOR'S VISITS AND NOTICES SERVED DURING 1950.

GENERAL SANITATION

			$N\epsilon$,	ispections or visits
Water Supply					55
Drainage			4 + 4		490
Offensive Trades					3
Moveable Dwellings					15
Factories					53
Workshops and Workplace	ces	* * a			5
Bakehouses				·	8
Public Conveniences					24
Refuse Collection					298
Refuse Disposal					290
Smoke Observations					4
Schools					38
Shops					5
Miscellaneous Sanitary V	isits				172
Sewage Disposal Works					101
Sewage Effluent Samples					2
Mortuary					4
Petroleum Licences					7
Rivers Pollution					39
Housing					
Under Public Health Acts					
No. of Houses inspected					117
Visits paid to above hous	ses	• • •			485
Under Housing Acts					
No. of Houses inspected					6
Visits paid to above hous	ses				9
Overcrowding					
No. of Houses inspected					7

Verminous Premises

No. of Houses inspected				6
Visits paid to above houses				24
Insect Infestation	• • •			13
Miscellaneous Housing Visits				152
Infectious Disease				
Injections Discust				
Inquiries in cases of I.D				51
Visits re Disinfection				25
Miscellaneous Infectious Diseas	se visi	ls		55
Visits in connection with Food	l Poise	oning		10
MEAT AND FOOD INSPECTION				
Inspection of Meat				
Visits to Slaughterhouses				3
Visits to Shops and Stalls	* * *			4.
Visits to:		• • •	• • •	•
Bakers				4
Butchers				14
Fishmongers and Poulterers				12
Grocers		• • •		20
Greengrocers and Fruiterers		• • •		$\frac{2}{2}$
Cowsheds (Drainage)				14
Dairies and Milkshops				44
Ice Cream Premises				45
Food Preparing Premises				5
Restaurants				
		i V C	-	spections
			or i	visits
Fried Fish Shops				4.
Licensed Premises				10
Street Vendors and Hawkers' C				9
Visits for Condemnation of Food	dstulls			34
Miscellaneous Food Visits	• • •			5
Notices Served				
N. C. I. C				111
No. of Informal Notices served		_		40
No. of Informal Notices compliance				
No. of Statutory Notices served		 . l.		15 5
No. of Statutory Notices compl	red wi	(II		J

FACTORIES ACT, 1937 AND 1948.

1.—Inspections for purposes of provisions as to health (including inspections made by Sanitary Inspectors).

	Number on		Number of	
PREMISES	Register	Inspections	Written Notices	Occupiers Prosecuted
(1) Factories in which Sections 1, 2, 3, 4 & 6 are to be enforced by Local Authorities	17	8	1	
(2) Factories not included in (1) in which Section 7 is enforced by the Local Authority Other Premises in which	70	41	7	
Section 7 is enforced by the Local Authority (excluding out-workers' premises)	7	4	_	
Тотаг	94	53	8	Nil.

2.—Cases in which Defects were found.

		No. of c			
DADTIGULADO			Refe	erred	
PARTICULARS	Found	Remedied	To H.M. Inspector	By H.M. Inspector	Prosecutions
Want of Cleanliness	4	4			
Overcrowding Unreasonable Tem-	*				
perature					
Inadequate Ventila- tion Ineffective Drainage					
of Floors	-				
Sanitary Conveniences: (a) Insufficient (b) Unsuitable or					
defective (c) Not separate for	4	4			
sexes					
Other Offences	4	4			
Total	12	12		_	_

Outwork Sections 110 and 111

Nature of Work

Wearing Apparel—Making etc. Number of outworkers in list required by Section 110-57.

11.—STREET NAMEPLATES

Street nameplates were obtained and fixed throughout the Town of Dursley.

PLAYING FIELDS

A Super Safety Slide and 1 Tubular 4 Swing Frame were provided and fixed at the Council Housing Estate, Draycott Crescent, Cam.

CAR PARKS

A survey was taken of property situated at Water Street, Dursley, and plans were prepared for a Car Park to accommodate 19 cars.

I am, Mr. Chairman, Sir, Ladies and Gentlemen,

Your obedient servant,

H. J. DIMERY,

Engineer and Surveyor and Chief Sanitary Inspector.



